

GOAL

Improve quality and availability of behavioral services through DD waiver to parallel what is accepted as “best practice” in the field through the following: increasing the number of competent behavioral providers, delivering best practice guidelines for behaviorists, providing training to case managers on guidelines and associated expectations of the service, establishing expectations for behavior plans in permanent DD regulations, identifying providers for those in need of services in a timely manner, and implementing an overarching quality review and improvement process surrounding behavioral planning supports.

DESIRED OUTCOME	PARTY / DEPT RESPONSIBLE	ACTION STEPS	DUE DATE
1. By June 2019, DBHDS will increase the number of Positive Behavior Support Facilitators and Licensed Behavior Analysts by 30% over the July 2015 baseline and reassess need by conducting a gap analysis and setting targets and dates to increase the number of consultants needed so that 86% of individuals whose Individualized Services Plan identify Therapeutic Consultation (behavioral support) service as a need are referred for the service (and a provider is identified) within 30 days that the need is identified.	Division of Developmental Services	<ol style="list-style-type: none"> 1. Utilize current authorization data to determine ongoing precise number of PBSF and LBAs that are billing services. 2. Compare gathered data to 2015 baseline. 3. Partner with VABA to complete survey on therapeutic consultation services. 4. Information dissemination to PBSFs on permanent regulation changes 5. Information dissemination to VABA on permanent regulation changes 6. continue ongoing communication with PBS Forum and VABA on the service 7. comparison data ongoing via WaMS ISP review and authorization data 	<ol style="list-style-type: none"> 1. complete as of 9/2019, ongoing review 2. complete 10/15/19 3. complete 10/31/19 4. TBD based on approval of permanent regulation changes 5. TBD based on approval of permanent regulation changes 6. ongoing 6. ongoing quarterly
2. The Commonwealth will provide practice guidelines for behavior consultants on the minimum elements that constitute an adequately designed behavioral program, the use of positive behavior support	Division of Developmental Services	<ol style="list-style-type: none"> 1. Develop draft guidelines for behavior plan guidelines based on permanent regulations 2. Provide supplemental information which includes consideration of trauma history, use of least restrictive and person centered/individualized behavioral treatment, etc. 	<ol style="list-style-type: none"> 1. draft completed as of 11/7/19, final contingent on regulation changes 2. draft completed as of 11/7/19, , final

practices, trauma informed care, and person-centered practices.		3. Publicly post information on DBHDS website or other venue that is accessible to the public; disseminate information to behavioral community on availability of this resource	contingent on regulation changes 3. TBD based on approval of permanent regulation changes
3. The Commonwealth will provide the practice guidelines and a training program for case managers regarding the minimum elements that constitute an adequately designed behavioral program and what can be observed to determine whether the plan is appropriately implemented.	Division of Developmental Services	<ol style="list-style-type: none"> 1. develop a basics of quality indicators in behavior planning training 2. training incorporates how CMs can discern if plan is being implemented appropriately 3. develop associated competency assessment 4. determine venue for providing this training 	<ol style="list-style-type: none"> 1. draft due 1/30/20, final contingent on regulation changes 2. draft due 1/30/20, final contingent on regulation changes 3. draft due 2/15/20, final contingent on regulation changes 4. options for web based due 3/31/20
4. The permanent DD waiver regulations will include expectations for behavioral programming and the structure of behavioral plans.	Division of Developmental Services	<ol style="list-style-type: none"> 1. create draft regulations, first public comment period, etc. 2. updated draft to DMAS and to AG's office based on first public comment period 3. second public comment period, revise and finalize based on final public comment period 4. disseminate this information to all current and prospective providers 5. train service authorization staff in Developmental Services staff on new expectations 	<ol style="list-style-type: none"> 1. completed 2. TBD based on Attorney General's office review 3. TBD based on Attorney General's office review 4. TBD based on finalization of regs 5. initial information on draft language was conveyed to SA staff in 12/2019; TBD based on finalization of regs
5. Within one year of the effective date of the permanent DD Waiver	Division of Developmental Services	1. This ties into outcome 1.6 above; monitoring new data system out of WaMS to obtain comparison data	1. system expected to launch early 2020

regulations, 86% of those identified as in need of the Therapeutic Consultation service (behavioral supports) are referred for the service (and a provider is identified) within 30 days.		2. based on review of data, based on data analysis determine subsequent action steps, gaps, etc.	2. begin data review once data are available in early 2020 to establish baseline
6. 86% of individuals authorized for Therapeutic Consultation Services (behavioral supports) receive, in accordance with the time frames set forth in the DD Waiver Regulations, A) a functional behavior assessment; B) a plan for supports; C) training of family members and providers providing care to the individual in implementing the plan for supports; and D) monitoring of the plan for supports that includes data review and plan revision as necessary until the Personal Support Team determines that the Therapeutic Consultation Service is no longer needed.	Division of Developmental Services	<ol style="list-style-type: none"> 1. determine baseline from monitoring data out of WaMS (see 1.6 and 5.1) 2. determine what will be statistically significant sample size to draw from for review for these behavior plan and training components based on the baseline; determine when measures of # of individuals authorized for therapeutic consult is to occur ongoing and how frequently audits will occur 3. Set up tracking system for A-D 4. begin audits 	<ol style="list-style-type: none"> 1. system expected to launch early 2020 2. sample size determined, launch audits based on finalization of regulations 3. draft tracker set up 12/31/19 4. TBD based on finalization of regulations
7. DBHDS will implement a quality review and improvement process that tracks authorization for therapeutic consultation services provided by behavior consultants and assesses: 1) the number of children and adults with an identified need for Therapeutic Consultation (behavioral supports) in the ISP assessments as	Division of Developmental Services	<ol style="list-style-type: none"> 1. determine baseline from monitoring data out of WaMS (see 1.6 and 5.1) 2. set up data capture system in REACH Data Store to determine those that are accessing REACH, have behavioral services, and are/are not hospitalized 3. set up internal tracking system that targets the needed quantitative measures in 7.1, 7.2, and 7.4, and also incorporates qualitative info from 7.3 and 7.5 (note, 7.4 appears to be duplicative measure of 6 A-D) 	<ol style="list-style-type: none"> 1. system expected to launch early 2020 2. data system modified as of 1/20/20 3. draft internal tracking system created as of 12/31/19

<p>compared to the number of children and adults receiving the service;</p> <p>2) from among known hospitalized children and adults, the number who have not received services to determine whether more of these individuals could have been diverted if the appropriate community resources, including sufficient CTHs were available;</p> <p>3) for those who received appropriate behavioral services and are also connected to REACH, determine the reason for hospitalization despite the services;</p> <p>4) whether behavioral services are adhering to the practice guidelines issued by DBHDS; and</p> <p>5) whether Case Managers are assessing whether behavioral programming is appropriately implemented.</p>		<p>4. create and monitor data collection system(s) on case managers that are accessing basics in best practices of behavioral services training (outcome 3); qualitative review to coincide with review of hospitalized persons</p> <p>5. commence quarterly look backs with REACH and other partners (e.g. case managers) for information that cannot be gathered from quantitative data (e.g. determine the reason for hospitalization despite services), .</p>	<p>4. contingent on permanent regs content approval</p> <p>5. contingent on permanent regs content approval</p>
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